

mailed 3-25-09

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

RECEIVED

Please read the instruction before completing. Attach additional sheets if necessary.

MAY 04 2009

PERSONAL INFORMATION:

COMMISSION
ON ETHICS

NAME: <u>Nola Holton</u>	LENGTH OF RESIDENCE IN NEVADA: <u>56 years</u>
ADDRESS: <u>P.O. Box 358</u>	
CITY, STATE, ZIP: <u>Alamo, Nev 89001</u>	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE: <u>56 years</u>
TELEPHONE: <u>725-725-3723</u>	E-MAIL: <u>nholton@leturbowet.com</u>

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required and check each box accordingly i.e. annual, candidate or appointment filing. NRS 281A.620.1(g).

Title of Public Office and Name of Government	Elected, appointed or appointed to elected (E, A, AE)	Annual Compensation	Date elected or appointed	ANNUAL NRS 281A.600.1 & 281A.610.1	CANDIDATE NRS 281A.610.1(a)	APPOINTMENT NRS 281A.600.1
<u>Justice of the Peace</u>	<u>E</u>	<u>\$ 28,620.00</u>	<u>01/07</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B (Sources of Income): List each source of your income (in addition to any source listed in Section A), or that of any member of your household who is 18 years of age or older. NRS 281A.620.1(b).

	Household	
	Self	Member
<u>Caliente Municipal Court</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Holton Truck Wines</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

SECTION C (Real Property): List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state. NRS 281A.620.1(c).

Specific Location	Particular Use
<u>3640 Meikle Ln. Las Vegas Nev</u>	<u>Secondary Residence</u>
<u>98 Broadway, Alamo, Nev</u>	<u>Comm Property - Storage Workshop</u>
<u>22 Theresa Ln Alamo, NV</u>	<u>Residence</u>
<u>358 First South Alamo, NV</u>	<u>Primary Residence</u>
<u>E. Park Blvd, Alamo.</u>	<u>5 acres VACANT LAND</u>

Name of Public Officer: _____

SECTION D (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on your personal residence; and (2) debt on a motor vehicle for personal use retained by seller. NRS 281A.620.1(d).

	Household	
	Self	Member
Check the appropriate boxes		
BANK of America	<input checked="" type="checkbox"/>	

SECTION E (Gifts): List the gift, identity of donor and value of each gift if all gifts received are in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action]. NRS 281A.620.1(e).

Gift	Donor	Value of Gift
NONE		\$
		\$
		\$
		\$

SECTION F (Business Entities): List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity. NRS 281A.620.1(f).

	Household	
	Self	Member
Check the appropriate boxes		
Holton Tenck Lines, INC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
High Miler, INC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
TWH Enterprises	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 3-25-09

Signature: Nola HoltonPrint Name: NOLA HOLTEN**WHERE TO FILE:****APPOINTED PUBLIC OFFICERS
SUBMIT TO:**

Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 10
Carson City, Nevada 89706
775.687.5469 • 775.687.1279 fax

**ELECTED PUBLIC OFFICERS OR CANDIDATES
SUBMIT TO:**

Nevada Secretary of State, Elections Division
101 North Carson Street, Suite 3
Carson City, Nevada 89701
775.684.5705 • 775.684.5718 fax

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>RECEIVED</p> <p>B. Received by (Printed Name) SECRETARY OF STATE</p> <p>C. Date of Delivery MAR 27 2009</p> <p>D. Is delivery address different from item 1? Yes If YES, enter delivery address below: Secretary of State</p>	
<p>1. Article Addressed to:</p> <p>Nevada Secretary of State Elections Division 101 North Carson Street, Suite Carson City, Nevada 89701</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> P.D.D.</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7001 1940 0001 4159 4226</p>		<p>4. Restricted Delivery (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004

Domestic Return Receipt

10256-02-M-1540

7001 1940 0001 4159 4226											
<p>U.S. Postal Service CERTIFIED MAIL RECEIPT Domestic Mail Only. No Insurance Coverage Provided.</p>											
<p>OFFICIAL USE</p>											
<p>Sent to Nevada Secretary of State State, Adj. Elections Division or PO Box No. 101 North Carson St., Suite 3 Carson City, Nevada 89701</p>	<table border="1"> <tr> <td>Postage</td> <td>\$.42</td> </tr> <tr> <td>Certified Fee</td> <td>2.70</td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td>2.20</td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Total Postage & Fees</td> <td>\$ 5.32</td> </tr> </table> <p>USPS</p>	Postage	\$.42	Certified Fee	2.70	Return Receipt Fee (Endorsement Required)	2.20	Restricted Delivery Fee (Endorsement Required)		Total Postage & Fees	\$ 5.32
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